

Office of Attorney General Commonwealth of Pennsylvania Application for Employment

We appreciate your interest in the Office of Attorney General and assure you that we are sincerely interested in your qualifications. A clear understanding of your background and work history is essential in order for us to consider you for employment. Please type or print legibly in ink. Resumes are not considered a substitute for complete answers. The use of this form does not mean there are any available positions nor in any way obligates the Office of Attorney General. We hire only United States citizens and aliens lawfully authorized to work in the United States.

The Office of Attorney General is an equal opportunity employer and complies with the Americans With Disabilities Act (ADA) by providing equal opportunity for qualified applicants with a disability.

1. OFFICIAL USE 2. NAME Last			Mike Fisher													
			ATTORNEYGENERAL													
			First			M	l	3. SOCIAL SECURITY NUMBER								
4. MAIL	ING ADD	PRESS	No.		Str	eet				City						
County State			Zip	Zip Code 5.			.TELEPHO	TELEPHONE NUMBER (Home) 6. TELEI					HONE NUMBER (Work)			
7. ARE YOU A UNITED STATES VETERAN? □Yes □No			8. HAVE YOU EVER BEEN EMPLOYED PENNSYLVANIA? If yes, by what agency?				D BY THE	COM	MONWEAL	TH OF	From Mo. & Yr.	To Mo. & Yr.				
9. COU	INTY WH	ERE YOU WILL ACCE	PT EMPLOYN	MENT	10. EMPL 0 □ Attorney		PREFERI	ENCE		that apply∫ □Civil Inv			□Legal I	ntern		
□Statewide		☐Centre	□Luzerne		□Narcotic	-		□Admir					□Nonpaid Intern			
□Alleg	□Allegheny □Dauphin		Lycoming	g	Consum					□ Accounting/Auditing □ Computer			□Clerk			
□Bucks □Erie		□Erie	□Montgom	nery								□Clerk Typist □Clerk Stenographe				
			□Philadelp	hia	•	J		<u>_</u>			•			Gerk Stenographer General Laboring		
□Cambria □Lehigh			□Westmor	· Dopedial Agent/insura				ronmental Crimes					Other (Specify)			
					☐Special .	Agent/Re	egulatory C	omplia	ance Inves	tigation						
	Permanei Temporai	E YOU AVAILABLE FOR (Check all that apply) ermanent Full-Time			MINIMUM SA OU WILL A O HIGH SCH	CCEPT	THE If ye	OFFI s, list r	ICE OF AT names and OF LAST I	TORNEY (GENERAL ips	? [PLOYED BY Yes Di			
HIGH SCHOOL EDUCATION	☐Yes ☐No ☐Still attending If no or still attending, highest grade comple High school curriculum							Street								
들			□Business specify)		□General		City			State			Zip Code			
7,7	12C. NAME & LOCATION OF COLLEGE OR UNIVERSITY & zip code, if known) If you expect to graduate within give month and year you expect to receive your degree							tended Years			edits Completed		Type of Degree	Year of		
SE S							То	C	ompleted	Semes Hours			(BA, etc.)	Degree		
LEGE, LAW SCHOOL, POST-HIGH SCHOOL EDUCATION																
COLLEG OR POS E																
			Credits Completed					· · · · · · · · · · · · · · · · · · ·						Credits Completed		
			emester Hours	Quart Hou		E. GRADU	ATE F	FIELD (S) OF STUDY				emester Hours	Quarter Hours			

This Application must be returned to the Office of Attorney General, Human Resources Section, 14th Floor, Strawberry Square, Harrisburg, PA 17120, and will make you eligible for employment for a period of one year.

12F. OTHER SCHOOLS OR TRA school, dates attended, sub								code, if	known) of	
13A. SPECIAL QUALIFICATIONS	T (office, industr	rial, prin	iting, etc.)		13B. APPROXIMATE NUMBI Typing	ORDS PER MINUTE orthand				
13C. CURRENT LICENSES OR CE Licenses / Certificates	Paralegal)	14.		DO YOU P	G FOR A POSITION THAT REQUIRES A DRIVER'S DSSESS A LEGAL AND CURRENT DRIVER'S LICENSE? indicate class					
				_	□No	□ 1 - 0	Car or light duty truck	□ 2&3	- Trucks	
15. LIST YOUR EXPERIENCE REC title and duties changed in the c security number on each addition MAY INQUIRY BE MADE OF Y	ourse of your work with on the contract of your work with one of the contract	one employer, describe the or legal intern applicant, co	changed duties omplete Suppler	in a nev mental i	w block. A Application	ttach addit n for Attorn	ional sheets, if needed. Indeey and Legal Intern Position	clude yo ons in l <u>ie</u>	ur name and social u of No. <u>15</u> .	
15A. NAME AND ADDRESS OF EM (include zip code, if known)	IPLOYER'S ORGANIZA	ATION	Dates empl	loyed (give montl	n & year)	r) Average number of hours per week			
(include zip code, ii known)			From To							
			Salary or e	_			Your reason for wa	anting to	leave	
			Beginning S Present		per per					
						1				
Exact title of your position	Name of imme	diate supervisor	Area Code	Tele	phone No		Number and kind of emplo	yes you	supervise	
Description of duties and accomplishr	nents in your work									
	•									
15B. NAME AND ADDRESS OF EN (include zip code, if known)	IPLOYER'S ORGANIZA	TION	Dates employed (give month & ye				ar) Average number of hours per week			
(morado zip oddo, mimorni)			From To				Vous sooner for large in a			
			Salary or e	Ū	per		Your reason for lea	aving		
				\$	per					
			Litaling	Ψ	Poi					
Exact title of your position	diate supervisor	Area Code	Area Code Telephone No. Number ar				and kind of employes you supervised			
Description of duties and accomplishr	nents in your work									
	, ,									
Any additional work experience must	pe added on a separate	sheet of 8 1/2 x 11 white page	aper. Be sure to	print.	Include yo	our name,	social security number and	same ir	formation as	
requested in questions 15A and B.							·			
40 ARE VOLLA LIMITER		ITEMS 16 THROUGH 19 B								
16. ARE YOU A UNITED STATES CITIZEN?	17. WITHIN THE L	.AST FIVE YEARS HAVE Y	YOU BEEN FIRE	ED FRO	OM ANY J	IOB FOR A	ANY REASON?			
□Yes □No		AST FIVE YEARS HAVE	OU QUIT A JO	B AFT	ER BEING	NOTIFIE	D THAT YOU WOULD BE	FIRED'	?	
If no, are you an alien	□Yes									
lawfully authorized to work in the United States? NOTE: If your answer to 17 or 18 is yes, give details. Show name and address (including zip code) of employer, approximate date, and reasons in each case. This information should agree with your answers in Section 15. A conviction or a firing does not								ot		
□Yes □No		you cannot be appointed. arate sheet of paper so tha				iring and h	ow long ago it occurred is	importa	nt. Give all	
19. WERE YOU EVER CONVICTED (Omit minor traffic violations and any offense is not a bar to employment in	offense committed before	e your eighteenth birthday v	which was finally	settled	l in a juve	nile court o	or under a youth offender la	w. Con	viction of a criminal	
20. REFERENCES: List three person		you and who have definite k	knowledge of you	ur quali	fications a	ind fitness	for the position for which yo	ou are a	oplying. Do not	
			usiness or Home Address eet, City, State and Zip Code)				Business or Occupation	n	Telephone	
CERTIFICATIO	N	SIGNATURE OF A	APPLICANT (IN	INK)				DA	TE	
I certify that all of the statements made by correct to the best of my knowledge and b faith. Any misstatements or omissions cause for dismissal.	elief, and are made in good									

RESEARCH QUESTIONNAIRE

The Office of Attorney General wants to be certain that the recruitment and hiring of employees is fair for everyone. Please be advised that the information requested below will be kept confidential and will not affect your chances for employment. This information is voluntary; your answers will be used for research purposes and to help assure equal employment opportunities.

Sex	Male	Female	Date of Birth						
BLACK/AFRICAN AMERICAN (NOT OF HISPANIC ORIGIN): Persons having origins in any of the black racial groups of Africa.									
	HISPANIC: Persons of Mexican, Puerto Rican, Cuban, Central or South American, or other Spanish culture or origin, regardless of race.								
	WHITE (NOT OF HISPANIC ORIGIN): Persons having origins to the original peoples of Europe, North Africa, or the Middle East.								
	NATIVE AMERICAN: Persons having origins in any of the original peoples of North America, and who maintain cultural identification through tribal affiliation or community affiliation.								
		Subcontinent, or the Pa	ving origins in any of the Far East, acific Islands. This area includes, for example, Samoa.						